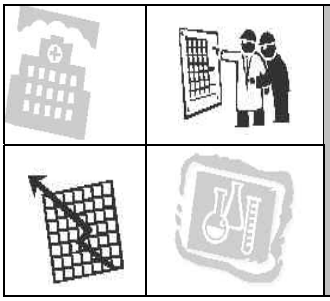

Ontario Influenza Bulletin

Ministry of Health and Long-Term Care

Public Health Branch

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Week #51: Week Ending December 20, 2003

Influenza Activity in Ontario

Widespread influenza activity continued in all health regions of the province during the week ending December 20. Confirmed influenza cases and institutional influenza outbreaks were reported in at least all the health regions during this period. There were 120 influenza like illness (ILI) outbreaks reported during this surveillance period and 70 (58.3%) of the ILI outbreaks were due to influenza A. Health units reported 641 confirmed influenza cases (all influenza A) through the Reportable Diseases Information System (RDIS) (Table 2). Six influenza-related deaths have been reported through RDIS since October 27, 2003 (Table 3).

Table 1. Comparison of Influenza Activity in Ontario for the 2002-03 and 2003-04 Influenza Surveillance Seasons

Indicator	2002-03 Season	2003-04 Season
	Week Ending, December 21, 2002 (week 51)	Week Ending December 20, 2003 (week 51)
No. of ILI Visits to Sentinel Physicians (ILI Rate/1000 patients seen for all reasons week ending December 20)	Unavailable	119
+Institutional Influenza Outbreaks	Unavailable	125
+Institutional ILI Outbreaks	Unavailable	155

+ October 27, 2003 - December 20, 2003

Please note: The data for the weeks ending December 20th and December 27th that the Ontario laboratories Report to the Center for Infectious Disease Prevention and Control (CIDPC), Health Canada will be issued during the week of January 5th. 2004.

Table 2. Week Ending December 20, 2003 Influenza Cases in Ontario Reported Through the Reportable Disease Information System (RDIS)

Health Unit	Influenza A		Flu B	Change (Week 51-Week 50)
	Week 50	Week 51		
Algoma	0	9		9
Brant	0	1		1
Chatham-Kent	1	7		6
Durham Region	19	46		27
Grey-Bruce	7	26		19
Haliburton-Kawartha	28	50		22
Halton	19	58		39
Haldimand-Norfolk	2	10	1	7
Hamilton-Wentworth	127	257		137
Hastings-Prince Edward	8	23		15
Huron	5	11		6
Kingston-Frontenac	38	49		11
Leeds-Grenville	1	6		5
Middlesex-London	7	8		1
Niagara	10	42		32
North Bay	1	9		8
Ottawa-Carleton	2	30		28
Oxford	4	5		1
Peel	61	125		64
Peterborough	67	69		2
Porcupine	29	41		12
Simcoe	12	54		42
Sudbury	4	17		13
Toronto	57	126		69
Waterloo	5	9		4
Wellington-Dufferin	4	31		27
York Region	3	11		8
Total	**521**	**1162**		

***641 new cases of influenza A were reported during week 51**

PROVINCIAL INFLUENZA CASES PER 100,000 (September 1-December 20) = 9.7/100,000

Table 3

Influenza-related Deaths reported through RDIS for Sept. 1- December 20, 2003 = 6

Health Unit	Age	Sex	Type of Flu	Prior Condition
York Region	87	M	Flu A	Related to Ship Cruise Outbreak
Peterborough	11	M	Flu A	Underlying Medical condition
Halton	8	F	Flu A	Underlying medical condition
Halton	78	F	Flu A	Underlying medical condition
Haliburton	98	F	Flu A	Institutional Outbreak-related
Algoma	87	M	Flu A	Institutional Outbreak-related

Federal FluWatch Sentinel Physician Surveillance Activity in Ontario

The overall rate of influenza-like illness (ILI) reported through the Federal FluWatch system were 118 ILI patients seen per 1,000 patients that were seen by the sentinel physicians for all reasons, including ILI. Again, during week 51, the ILI patients rates among children were much higher than the overall rate: 253 ILI patients/1,000 patients seen for all reasons in the 0-4 year age group and 367 ILI patients/1,000 patients seen for all reasons among the 5-19 year age group.

Canada: December 13 to December 20, 2003 (Week 51)

Widespread activity continued throughout Ontario, while continuing to decline in the Territories and Saskatchewan. Across Canada, during the week ending December 20 (week 51), sentinel physicians reported 53 cases of influenza-like illness (ILI) per 1000 patient visits, which is within the expected range for this time of year. To date, there have been a total of 272 outbreaks reported, including LTCF/retirement lodges (176), hospitals (18) and schools (78). Current data in Canada, the U.S. and globally indicate that the impact of A/Fujian is still within the expected range observed for previous severe flu seasons.

Laboratory Confirmations

Health Canada received 4,537 reports of laboratory tests for influenza, including 771 (17.0%) influenza A detections and 10 (0.2%) influenza B detections.

Source: http://www.hc-sc.gc.ca/pphb-dgspsp/fluwatch/03-04/w44_03/index.html#top

United States: CDC: During the week ending December 13, 2003 (week 50), widespread or regional activity was reported by 48 of the US states, with local or sporadic activity reported by the remainder. ILI visits accounted for 7.4% of patient visits to sentinel physicians, which is above the national baseline of 2.5%. Sentinel cities reported 7.2% of deaths attributable to pneumonia and influenza, which is below the epidemic threshold of 7.7% for this week. The CDC received 3,814 specimens for influenza testing; 1,365 (35.8%) were positive. A total of 265 influenza A(H3N2) isolates have been characterized to date; 62 (23%) were antigenically similar to the vaccine strain A/Panama/2007/99 and 203 (77%) were similar to the new drift variant A/Fujian/411/2002.
CDC advises that for details of the 2003-04 influenza season in the US to date, with details on severe illness and deaths, to see: MMWR: <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5249a1.htm>
Source*: *Centers for Disease Control and Prevention (CDC): <http://www.cdc.gov/ncidod/diseases/flu/weekly.htm>

International:
WHO: Widespread influenza activity associated with influenza A(H3N2) persists in the northern hemisphere. Increasing activity is reported in parts of Europe (Czech Republic, Denmark, Finland, Italy, Norway, Russia, Switzerland, Russia Federation and Ukraine), North America (the United States) and Africa (Tunisia), whereas as activity has declined in the UK, Portugal and Spain.
Note: Globally, approximately 60% of strains are well inhibited by A/Panama antisera.

Avian Influenza A(H5N1): An outbreak of avian Influenza A(H5N1) in the Republic of Korea, reported to WHO has resulted in 19,000 chicken deaths on a poultry farm and further spread to 9 poultry farms in 4 provinces. About one million chickens and ducks are to be culled. The isolated strain is being examined to determine its relation to other A(H5N1) viruses, which have emerged in Asia recently. So far, no human A(H5N1) cases have been reported.

SARS: The Ministry of Health of China informed WHO of a suspected case of SARS in a hospital in Guangzhou. At present, the case remains classified as suspected SARS. The Ministry of Health and WHO are collaborating to review laboratory test results and other technical issues, the ongoing epidemiological investigation and infection control issues. Although the final diagnosis of this case is still awaited, WHO has been strongly assured that all appropriate steps have been taken by health authorities to ensure that any risk to the public health has been minimised.
***Source:* WHO WPRO SARS press release:** <http://www.wpro.who.int/sars/docs/pressreleases/pr_29122003.asp>

European Influenza Surveillance Scheme (EISS) Week 51
During Week 51, the European Influenza Surveillance Scheme (EISS) has observed that the influenza H3N2 wave had moved further across Europe. The incidence of influenza-like illness and/or acute respiratory illness is now decreasing in Belgium, France, and Luxembourg and following the pattern seen in England, Ireland, Northern Ireland, Portugal, Scotland, and Spain. Influenza activity increased in other countries in Central Europe, particularly in Lithuania, the Netherlands, Romania, and Switzerland. The predominant virus circulating is still A/Fujian/411/2002 (H3N2)-like.
Source: http://www.eiss.org/cgi-files/bulletin_v2.cgi

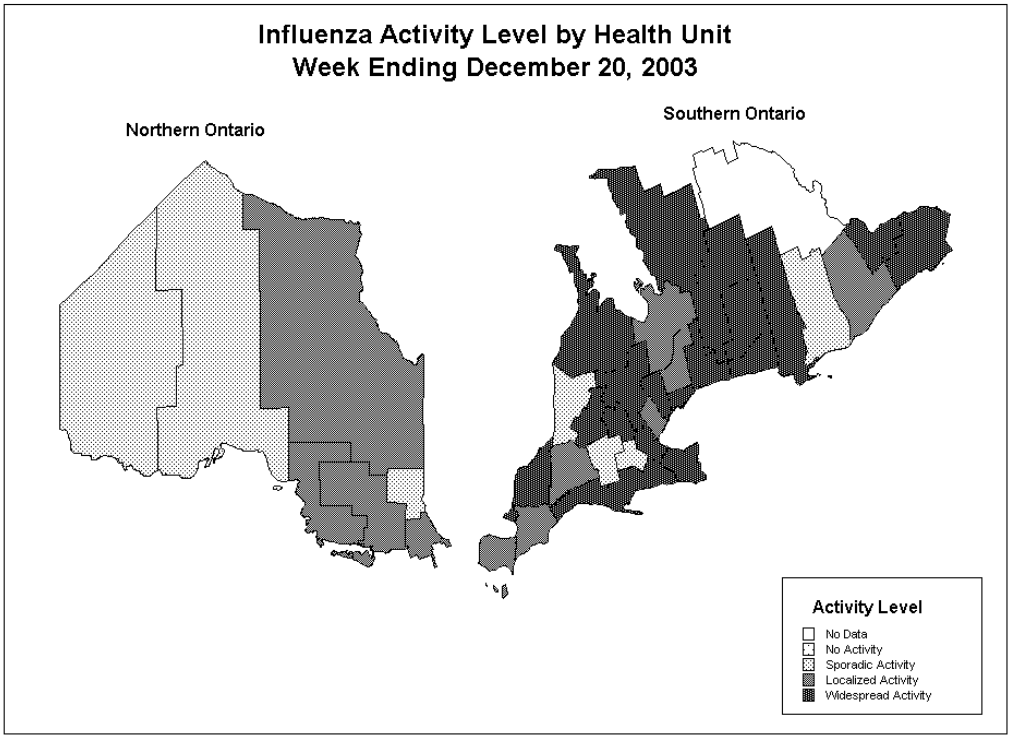
Table 4. Institutional Influenza Outbreaks by Health Unit in Ontario, 2003-2004 for Week 51

Health Unit	Institution Type	Total Number Residents	Number Ill Residents	RAR	# of Resident Cases with Pneumonia	# of Resident Cases Hospitalized	# of Deaths Resident Cases	SAR	Organism
Haliburton, Kawartha, Pine Ridge	NH	48	11	22.9	0	0	0	0	**Flu A**
Haliburton, Kawartha, Pine Ridge	HFA	164	1	0.6	0	0	0	0	**Flu A**
Brant	RH	119	5	4.2	0	0	0	11.5	**Flu A**
Brant	RH	79	15	19	0	0	0	0	**Flu A**
Brant	RH	69	5	7.2	0	0	0	0	**Flu A**
Brant	HFA	348	4	1.1	0	0	0	0	**Flu A**
Haldimand-Norfolk	NH	64	25	39.1	0	0	1	8.9	**Flu A**
Haldimand-Norfolk	HFA	184	1	0.5	0	0	0	1	**Flu A**
Haldimand-Norfolk	NH	64	12	18.8	0	0	0	5.1	**Flu A**
Haldimand-Norfolk	NH	142	2	1.4	0	0	0	?	**Flu A**
Peterborough	LTCF	249	2	0.8	0	0	0	0	**Flu A**
Simcoe	RH	71	17	23.9	N/A	1	1	5.6	**Flu A**
Simcoe	CCH	34	2	5.9	N/A	N/A	N/A	N/A	**Flu A**
Muskoka - Parry Sound	NH	74	6	8.1	0	0	0	1	**Flu A**
Halton	RH	84	5	5.9	1	2	0	1.6	**Flu A**
Hamilton-Wentworth	NH	45	18	40	0	0	0	0	**Flu A**
Hamilton-Wentworth	NH	125	11	8.8	4	0	0	5.9	**Flu A**
Hamilton-Wentworth	LTCF	126	7	5.6	0	1	1	5.3	**Flu A**
Hamilton-Wentworth	NH	183	11	6	0	0	0	0	**Flu A**
Niagara	HFA	39	17	45.6	0	0	2	10	**Flu A**
Niagara	CCH	16	4	25	1	0	0	0	**Flu A**
Niagara	HFA	30	6	20	0	0	0	0	**Flu A**
Niagara	NH	60	9	15	0	0	0	0	**Flu A**
Niagara	HFA	79	3	3.8	N/A	0	0	0	**Flu A**
Niagara	RH	100	14	14	0	0	0	2.4	**Flu A**
Wellington-Dufferin	RH	48	8	16.7	0	0	0	0	**Flu A**
Wellington-Dufferin	LTCF	88	13	14.8	0	0	0	1	**Flu A**
Wellington-Dufferin	Other	17	11	64.7	0	0	0	7.7	**Flu A**
Wellington-Dufferin	RH	65	2	3.1	0	0	0	0	**Flu A**
Eastern Ontario	RH	78	5	6.4	0	0	0	0	**Flu A**
Hastings & Prince Edward	LTCF	47	8	17	0	1	0	5.7	**Flu A**
Hastings & Prince Edward	LTCF	128	12	9.4	1	1	0	2.6	**Flu A**
Leeds, Grenville & Lanark	LTCF	69	24	34.8	2	0	0	8.6	**Flu A**
Ottawa - Carleton	LTCF	236	3	1.3	0	0	0	0	**Flu A**
Ottawa - Carleton	RH	59	7	11.9	0	0	0	1.1	**Flu A**
Ottawa - Carleton	Other	100	7	7	0	0	0	0	**Flu A**
Ottawa - Carleton	LTCF	99	2	2	0	0	0	0	**Flu A**
Ottawa - Carleton	RH	65	6	9.2	0	0	0	3.3	**Flu A**
Ottawa - Carleton	CCH	200	18	9	0	0	0	1.1	**Flu A**
Ottawa - Carleton	RH	75	8	10.7	0	0	0	0	**Flu A**
Ottawa - Carleton	NH	224	4	1.8	0	0	0	0	**Flu A**
Algoma	NH	146	11	7.5	3	3	0	1.3	**Flu A**

Chatham-Kent	NH	64	4	6.3	0	0	0	3.4	**Flu A**
Elgin-St. Thomas	LTCF	134	10	7.5	0	0	1	0.8	**Flu A**
Elgin-St. Thomas	LTCF	89	11	12.4	0	0	0	0	**Flu A**
Grey-Bruce	RH	36	8	22.2	0	6	1	4	**Flu A**
Grey-Bruce	NH	61	4	6.6	0	0	0	1.4	**Flu A**
Huron	NH	90	17	18.9	0	1	0	0	**Flu A**
Huron	RH	22	2	9.1	0	1	0	0	**Flu A**
Lambton	NH	144	3	2.1	0	0	0	2.9	**Flu A**
Lambton	NH/HFA	125	6	4.8	0	1	0	1	**Flu A**
Middlesex-London	NH	333	21	6.3	0	1	0	0.9	**Flu A**
Middlesex-London	RH	202	5	2.5	0	0	0	0	**Flu A**
Oxford	NH	104	4	3.8	0	1	0	0	**Flu A**
Perth	NH	75	24	32	0	0	0	16	**Flu A**
Perth	NH/HFA	95	4	4.2	0	0	0	2.7	**Flu A**
Peel	NH	155	25	16.1	1	4	0	2.4	**Flu A**
Peel	NH	66	1	1.5	0	0	0	0	**Flu A**
Peel	ACH	44	2	4.5	0	2	0	0	**Flu A**
York	NH/RH	98	8	8.2	0	0	0	0	**Flu A**
York	NH	124	18	14.5	2	1	0	5.1	**Flu A**
Toronto	NH	25	2	8	0	1	0	8.7	**Flu A**
Toronto	RH	167	23	13.8	1	1	0	0	**Flu A**
Toronto	NH	229	15	6.6	0	0	0	1	**Flu A**
Toronto	HFA	456	45	9.9	3	2	2	3.1	**Flu A**
Toronto	ACH/LTCF	192	41	21.3	1	1	3	11.7	**Flu A**
Toronto	CCH	160	8	5	0	0	0	0	**Flu A**
Toronto	HFA	95	15	15.8	0	4	1	1.6	**Flu A**
Toronto	HFA	237	8	3.3	0	0	0	0	**Flu A**
Toronto	NH	282	7	2.5	1	0	0	0	**Flu A**

RAR: Resident Attack Rate (# of residents ill/total number of residents)*100
SAR: Staff Attack Rate (# of staff ill/total number of staff)*100
NH = nursing home, RH= retirement home, combined facility consists of 2 or more types of institutions e.g. a NH section and a retirement home (RH) section; CCH = chronic care hospital, ACH= Acute Care Hospital, LTCF = long term care facility

Visit the Ministry of Health and Long-Term Care website weekly for the current issue, or back issues, of the Ontario Influenza Bulletin: ***http://www.health.gov.on.ca/english/providers/program/pubhealth/flu/flu_03/flubul_mn.****html*


Influenza Activity Level by Health Unit
Week Ending December 20, 2003
Northern Ontario
Southern Ontario
Activity Level
No Data
No Activity
Sporadic Activity
Localized Activity
Widespread Activity